

TENNESSEE SEX OFFENDER TREATMENT BOARD

POLICY NO. 3

BEST PRACTICE STANDARDS

1. Approved providers have specific training in the field of sex offender treatment in addition to the Tennessee Sex Offender Board Annual training.
2. Approved providers providing clinical services to sex offenders have participated in sufficient supervision of face to face clinical contact with sexual offenders.
3. Approved providers obtain continuing education in the field of sexual offender treatment.
4. Approved providers only provide sex offender treatment services and techniques in which they have education, training, and experience.
5. Approved providers are aware of the limitations of the client's self-report and will utilize multiple sources of information in order to corroborate the offender's self-report.
6. Approved providers are aware of the importance of group treatment with sexual offenders and will provide group weekly. However, approved providers recognize the need for adjunct services such as family, marriage, and individual. The use of a combination of services is most likely effective.
7. Approved providers recognize the importance of psycho physiological testing such as phallometry, polygraph, and viewing time in the treatment and assessment of sex offenders and will make every effort to include these measures as a part of the treatment protocol.
8. Approved providers recognize the importance of utilizing a "Team Approach" in the treatment of sexual offenders. Multiple clinicians, male/female co-group leaders, and regular communication/contact with probation/parole officers improve treatment services.
9. Approved providers recognize the limitations of community based treatment settings with offenders who are in complete denial of their sexual offending and make the appropriate referral to more intensive treatment/supervision settings.
10. Approved providers exercise caution when making decisions about contact between sex offenders and children. Top priority is given to the child's safety and well-being when considering contact between offenders and children.